



DONALD W. WYATT DETENTION FACILITY INCIDENT REPORT PACKAGE LIST OF CONTENTS

Date	: 06-05-2	2019	Time	: 11	:29	am pm	IR Nu	ımber:	
Incid	lent Class:		∠ 2	TYF	PEM	Incident Location:			
	ESCAPE				STAFF ASSA	NT TYPE		ATTEMPTED SEXUAL	Accaluz
	ATTEMPTED ESCAP	E		=	DETAINEE A		-	SEXUAL ASSAULT	ASSAULI
	RIOT	_		一		N DETAINEE FIGHT	급	ATTEMPTED SUICIDE	
	DISTURBANCE				CALCULATED	Use of Force	-	CONSTANT OBSERVA	TION WATCH
	EMERGENCY FACILI	TY LOCKDOWN			SPONTANEO	US USE OF FORCE	-	MEDICAL EMERGENO	:Y
_	FIRE				SERIOUS BRI	EACH OF SECURITY		HOSPITAL DETAIL	
	OTHER (SPECIFY):		ALC: NO.				and Tax in		
On	Wednesday June	5 2010 at appe	ovimat	Ju 11		ESCRIPTION			
On .	wednesday June	: 5, 2019 ас аррг			rming himsel		eu a co	de white in	stating Detainee
-	·	· · · · · · · · · · · · · · · · · · ·	Pana						
1.	Incident Repor	÷	керо	rt Fo	rms			Attached Yes	# of Pages
2.	Investigation R								1
3.		t Supplemental (Pages					Yes	2
4.	Medical Incide							Yes	1
5.	Summary of As	sault on Staff							
6.	Incident Summ	ary Report (Clas	s 1 and	2)				Yes	3
7.	Use of Force Re	port							
8.	Physical Eviden	ce/Chain of Cust	ody for	m) e	***
9.	Emergency call	list							7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
11.	Administrative	Detention Order	r						
12.	Disciplinary Rep	port							
13.	Disciplinary Hea	aring Report							
14.	Supplemental I	nterview (Detair	ee Inte	rview	rs)				
15.	Health Evaluati	on for Restrictive	e Housii	ng Pla	cement				
16.	Motor Vehicle	Accident Report							
17.	Investigation re	port							
18.	Photographs								
19.	Audio/Video M	ledia						Yes	1
20.	Miscellaneous (Documents: Com	mitme	nt Su	mmary			Yes	1
21	Copy of BOS ICE	Email						Yes	1
22	Inventory								
23	Constant obser	vation watch for	m					Yes	1
						Total nui	nber o	f pages (including this page) →	12
	Reviev	ved by: Captai	n				ĵ	Date: 06-05-2019	

Appendix G

DONALD W. WYATT DETENTION FACILITY SIGNIFICANT INCIDENT SUMMARY AND USE OF FORCE REPORT

		Time:	11.	20	7	IN AL		
lnc	e: 06-05-2019						umber:	
_	ident class: 🔲 1 🔀 2	2	Ty		lent location	:		
	ATTEMPTED ESCAPE		Ц	STAFF ASSAULT			FIRE	
	ESCAPE		Щ	DETAINEE ASSAULT			RIOT	
ATTEMPTED SEXUAL ASSAULT		AULT	\sqcup	DETAINEE ON DETAIL			DISTURBANCE	
	SEXUAL ASSAULT		Щ	CALCULATED USE OF			SERIOUS BREACH O	
	ATTEMPTED SUICIDE		ᆜ	SPONTANEOUS USE O			EMERGENCY FACIL	ITY LOCKDOWN
	SUICIDE		Ц	MEDICAL EMERGENO	CY	$ \Box$	DESTRUCTION OF F.	ACILITY
X	CONSTANT OBSERVATION	WATCH	Ш	HOSPITAL DETAIL			PROPERTY	
	OTHER (SPECIFY):							
Сар	me and Title of Staff M tain states, Sergean ainee(s) involved:		a	olved: nd Sergeant BOOKING#	BOOKIN		DATE OF	RACE
_					DATE		BIRTH	AUTOL
	SUMMARV	of INCID	FN	TAND FACH ST	LEE DEDCO	NIZ	PARTICIPATION	
	SUMMAKI	OI IIICID						NI .
~	7 7010	1 11 2						
Detail vous nis de cell.	June 5, 2019 at approximation. It was reported by all not eat or comply with court situation. Security and the was escorted from the Doctor remembers he was placed on cell with a video camera	# y Officer th facility r and medic to to noved the r ainee	29an rules cal si he h cape	was sticking was sticking was sticking arlier in the suntil he spoke to heaff arrived to ealth Service to be perclip from Detained continued to verbal onstant observation	initiated a cog a paperclip morning that is deportation cell and further evaluation as the complete thoughts watch in HSU	ode wathrous Detain office removated language of se	white(medical emergerigh his bottom and expression due to him being oved Detainee by the facility Doctord questioned him of the liftharm. Due to his a liftharm. Due to his liftharm.	ency) stating upper lips in ssed that he g upset about from his or, on why he was actions and

PLI	EASE CHEC	CK (1) T	HE APPROPRIATE BOX	(ES)			
Was verbal intervention successful			☐ Yes ☒ No ☐ N/A				
Use of Force and/or Application of	Restraints Ord	lered?	⊠ Yes □ No □ N/A				
If yes, name and title of authorizing member:	g staff	Captain					
Was the detainee placed in four-po			☐ Yes ☒ No ☐ N/A				
If yes, name and title of authorizing member:	g staff	N/A					
Four-point restraints beyond eight			☐ Yes ☒ No ☐ N/A				
If yes, name and title of psychiatric extension?	staff who auth	orize	N/A				
Time four-point restraints applied:	N/A		Time four point restraints ren	noved:	N/A		
Chemical Agents Used?	☐ Yes ⊠	No					
If yes, authorized by (name and Type of agent used? N/A Dispensed by: N/A	d title): N/A		Qualification Date: N/A	A			
Firearms Used?	☐ Yes ⊠	No					
If yes, authorized by (name and Type of firearm used? N/A Firearm discharged by: N/A		Onalifica	tion Date: N/A				
Any staff injuries?	☐ Yes ⊠						
If yes, staff person's name and	title: N/A						
Description of staff injuries: N	I/A						
Any detainee injuries?	⊠ Yes □	No II	yes, Medical Incident Report C	ompleted	1? ⊠ Yes □ No		
If yes, detainee's name and nur	nber:		#				
Description of detainee injuries	: paperclip tlu	rough top a	nd bottom lip				
Examined by medical personne	1? 🛛 Yes 🔲	No II	yes, medical staff member name	e and titl	e: RN.		
Type of treatment given:	Fi	rst Aid					
Outside medical treatment requ No	uired? 🗌 Yes	s 🛛 If	If yes, name of medical facility: N/A				
Disciplinary report issued?	Yes No	O	ffense code(s):				
AD Order completed? ⊠ Yes □	No Segr		ement Health Assessment form co	-			
Photos secured? X Yes - How man	y? 🗌 No		ideo secured? 🛭 Yes 🗌 No 🛭 andheld	Гуре (cir	cle one): DVR or		
Description of contraband and/or w	eapon(s):	N/A	Date/Time log	ged into	evidence: N/A		
Media attention? Yes No	Who? N/A						
	CHAIN		MAND CONTACTS				
Major: Warden:	_	<u> </u>		ate/Time			
11 MA UVII.	OTHE		SARY CONTACTS	ate/Time	: 6/4/19 1:08pm		
Police/Fire:			D	ate/Time			
User Agency:			Jurisdiction: D	atc/Time	: 4/4/19 1108pm		
Staff Signature:			Title: Captain		Date: 06-05-2019		

INCIDENT REPORT #: _____

19-0659

Comments/Action Taken:
Supplemental to SIR.
Supplemental to 223
Date: 06-05-2019 Shift Commander Signature: Captain
24hr review
(Conducted by the oncoming Shift Commander or higher authority not involved in the incident)
Date: 6-5-19 Time: 6:00 p
Comments/Action Taken:
Supplemental to SIR.
Approved Denied Modified
Shift Commander / or higher authority signature:
Comments/Action Taken:
Comments/Action Taken:
Comments/Action Taken: Proper procedures were followed.
Comments/Action Taken: Proper procedures were followed.
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Proper procedures were followed. Class 3 incident – Wardens signature is not applicable. Major Signature: Comments/Action Taken: (Class 1 or Class 2 Incidents – Class 3 if applicable)
Class 3 incident – Wardens signature is not applicable. Major Signature: Comments/Action Taken: (Class 1 or Class 2 Incidents – Class 3 if applicable)
Proper procedures were followed. Class 3 incident – Wardens signature is not applicable. Major Signature: Comments/Action Taken: (Class 1 or Class 2 Incidents – Class 3 if applicable)
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Class 3 incident - Wardens signature is not applicable. Major Signature: Comments/Action Taken: (Class 1 or Class 2 Incidents - Class 3 if applicable) All reports revenued no bother action required. Were not-Cred CS the Incident.
Proper procedures were followed. Class 3 incident – Wardens signature is not applicable. Major Signature: Comments/Action Taken: (Class 1 or Class 2 Incidents – Class 3 if applicable)

From: Sent: To: Cc: Subject:	Wednesday, June 05, 20 Detainee 06-05-2019	019 1:08 PM ; #	/ constant observation watch /
Detainee DOB: Booking Date:	#		
Detainee It was reported by C comply with facility rule Security and medical state to the health Serv paperclip from Detainee	# was sting of series was sting of series with the mass until he spoke to his deportation of arrived to cell and respice to be further evaluated by the series and questioned his coughts of self-harm. Due to his accordance was sting of self-harm.	icking a paperclip the norning that Detaine in officer due to him be moved Detainee if facility Doctor, im on why he was se	from his cell. He was escorted from The Doctor removed the

Respectfully,

Captain
Wyatt Detention Center
401-721-0393 Shift Commanders Office

401-721-0387 Control Center

@wyattdetention.com

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Appendix B Page 1 of 2

	DO	ONALD W. WYATT INCIDE	` DETENTIOI NT REPORT	N FACILITY		
INCIDENT REPOR	RT #:					
Time of Incident:	11:29 am	Date of Incident :	6/5/19	Place Incider	nt Occurred:	J-2,cell 11
Time of Report :	11:59a m	Date of Report:		6/5/1	19	
Detainee Name :			#.	H	ousing Unit:	
Codes & Subject:			Code Whi	te		
FROM:			DEPARTM	MENT:	Sec	curity
not eat or comply with with detainee was piercing his botton	Detainee facility rul	refused his bees until he spoke to his and noticed a thin piece	reakfast meal tradeportation office of metal on hinge	cer. At approxims lips. When I approxed to deescale	expressed nately 11:00am I pproached him I	that he would went to speak noticed that it and see
Signature:						
Detainee Was placed watch until he is clear			ch due to self-	mutilation. He	will remain o	n constant
Supervisor's Signat	are:				Date: 06-05-	2019
Shift Commander's	Review a	nd Designation of C	lass and Type	: Class 1	⊠ Class 2	Class 3
		Type of Incident:	М			

INCIDENT REPORT	#:		Appendix B Page 2 of 2
Comments/Action Taken	•		1 age 2 01 2
Supplemental to first action			
11			
		ŧ	
Date: 06-05-2019	Shift Commander Signa	iture:	
(Conducted by the en		review	
Date: 6.551	coming Shift Commande	Time:	thority not involved in the incident)
Comments/Action Taken	9	Time.	16:20 pr
Comments/Action Taken	(10)		
Supplimental to	SIR.		
Approved	Den	ied 🗍	Modified
Shift Commander / or hig			Modified
omit community of me	mer authority bignature.		
Comments/Action Taken			
Proper procedur	es were follow		
Tion		$\mathcal{M}_{\mathcal{C}}$	
	es were follow	wec. C	
	e wase follow		
	s was follow	**	
	es was follow		
	S wase follow		
	rdens signature is not app	***	
		***	6/6/19
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19
☐ Class 3 incident – War	rdens signature is not app	olicable.	6/6/19 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/18 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19 3 if applicable)
☐ Class 3 incident – War Major Signature:	rdens signature is not app	olicable.	6/6/19 3 if applicable)



DONALD W. WYATT DETENTION FACILITY

19-0659

Incident Class:	□1 ■ 2 ¾ 3		Type: N	1
Incident Location:			Housing Unit:	
Prepared By:			Title:	Sergeant
ricpared by.				
Narrative:		Code White		
10:29am. Once I arrived bottom bunk with a pap restrained him to preven on him in the cell and estended medical Nurse. The Doctor took out the that he was going him on a constant watch	was speaking to his paperclip from his lips was to hurt himself again. And I assisted him to HSU cock. /// End of Report.///	gh his top and bottom lipself more and to apply and department for further, to inform him what swith no issue and there was that time I notified Cancell and removed a	p. I immediatly secured he wrist restraints. I applied er medical care and evaluates and the Doctor was gowen no bleeding. The Details	the wrist restaints ation. Once we oing to do to treat. aince told Nurse e are going to place
Reporting Employee	Jagarda V.			
Date: 6-5-19	Time: 12:30	□AM ☑PM	Type: 🗹 Ind	dividual □Summary





DONALD W. WYATT DETENTION FACILITY INCIDENT REPORT. SUPPLEMENTAL PAGE

	INCIE	DENT RE	PORT- SUPPL	EMENTAL PAG	E	
Date:	Jun 5, 2019	Time:	11:29	★AM □PM	IR Numbe	er:
Incident Class:	□1 8 2	2 □ 3	Type:			
Incident Location:				ŀ	lousing Unit:	
Prepared By:	Sergeant				Title:	Sergeant
Narrative:	Code White				12-11-11-11-11-11-11-11-11-11-11-11-11-1	
Wednesday June 5, 20	19 at approxima	tely 11:29M	, I Sergeant	responded to a Co	de White in	initiated by Officer
. Upon enterin	g the cell I notice	ed that Deta	ainee	#	was sitti	ing on his bunk and
I inserted a paperclip ti	hrough the top a	nd bottom	of his lip. I assisted	SGT in cell	in securing	Detainee Common
arm while he applied h						ort, I applied leg
traints onto Detainee				Services Unit and w		
Jetainee Con	interits, he was p	olaceu on a	constant waten in	HSU cell	end of State	ement

porting Employee Signature:		Title	: Sergeant
te: June 5, 2019	Time: 1:00	□ AM APM	Type: ✓ Individual □ Summary

DONALD W. WYATT DETENTION FACILITY

Committment Summary Report

			Orduc:	Jointonico Dutte.
Offense Date:	Offense#:	Offense Description:	Grade:	Sentence Date:
Booking Notes: New committ Property searched Phone call offered Shower offered				
		Type: Officer ID# Start Date: End Date: Reason: Notes:		
Scars. Marks, Ta	toos:	Enemies;	Knov	vn Aliases:
Eye Color: Hair Color: Complexion: Build:			Gang:	
Marital Status: SSN: Height: Weight:	XXX-XX	-XXXX	Property Bag #:	Housing:
Current Age: Race:		Shift: Sex:	1 M	
Admission Type: Booking Date/Tin Birth Date:	ne:	Release Date: Booking Officer:	631	
SID #: Permanent ID#: Booking #: Jurisdiction: Arrested By: Transported By:				
Full Name:				

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	b. waterwayers and the
	n. Aprileon stantoni
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